Application or  $\underline{\underline{\mathsf{D}}}$  ocket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

| (Column 1) (Column 2)  |  |   |                           |                                |                     |  |            | SMALL ENTITY TYPE |                        |      | OR SMALL ENTITY     |                        |
|--|--|---|---------------------------|--------------------------------|---------------------|--|------------|-------------------|------------------------|------|---------------------|------------------------|
| TOTAL CLAIMS   |  |   | 51                        |                                | :                   |  | -          | RATE              | FEE                    |      | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED              |                                | NUMB                | ER EXTRA                                     |            | BASIC FEE         | 385.00                 | OR   | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 5 \ minus 20=             |                                | * 3)                |  |            | X\$ 9=            |                        | OR   | X\$18=              | 55°8                   |
| INDEPENDENT CLAIMS   |  |   | \(\frac{1}{\sqrt{2}}\) mi | nus 3 =                        | * \                 |  |            | X43=              |                        | OR   | X86=                | 86                     |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM P                                | RESENT                    |                                |                     |  |            | +145=             |                        | OR   | +290=               |                        |
| * If the difference in column 1 is less than zero, enter "0"   |  |   |                           |                                |                     | olumn 2                                      | į          | TOTAL             |                        | OR   | TOTALS              | 1414                   |
| CLAIMS AS AMENDED - PART II  |  |   |                           |                                |                     |  |            |                   |                        |      | OTHER THAN          |                        |
|  |  | (Column 1)                                  | (Colun                    |                                | nn 2)               | (Column 3)                                   | , ,        | SMALL             |                        | OR   | SMALL               |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                           | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY        | PRESENT<br>EXTRA                             |            | RATE              | ADDI-<br>TIONAL<br>FEE | -    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                     | **                             |                     | =  |            | X\$ 9=            |                        | OR   | X\$18=              |                        |
|  | Independent                                    | *   | Minus                     | ***                            |                     | = <u> </u>                                   |            | X43=              |                        | OR   | X86=                |                        |
|  | FIRST PRESE                                    | NTATION OF M                                | JLTIPLE DEF               | PENDENT                        | CLAIM               |  | ] [        | +145=             |                        | OR   | +290=               |                        |
|  |  |   |                           |                                |                     |  | L          | TOTAL             |                        | OR   | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                  |                           | (Colur                         | mn 2)               | (Column 3)                                   |            | ADDIT. FEE        |                        |      | ADDII. I EEI        |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                           | HIGH<br>NUM<br>PREVIO<br>PAID  | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA                             |            | RATE              | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                     | **                             |                     | =  |            | X\$ 9=            |                        | OR   | X\$18=              |                        |
|  | Independent                                    | *   | Minus                     | ***                            |                     | <u>                                     </u> | <b>↓</b> [ | X43=              |                        | OR   | X86=                |                        |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                           |                                |                     |  | ┙┇         | +145=             |                        | OR   | +290=               |                        |
|  |  |   |                           |                                |                     |  |            | TOTAL             |                        |      | TOTAL               |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |                           |                                |                     |  |            | ADDIT. FEE        |                        | 10.1 | ADDIT. FEE          |                        |
| AMENDMENT C  |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                           | HIGH<br>NUM<br>PREVIO<br>PAID  | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA                             |            | RATE              | ADDI-<br>TIONAL<br>FEE |      | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                     | **                             |                     | =  | ] [        | X\$ 9=            |                        | OR   | X\$18=              |                        |
| ME   | Independent                                    | *   | Minus                     | ***                            |                     | =  | <b>.</b>   | X43=              |                        | OR   | X86=                |                        |
| Ľ  | FIRST PRESE                                    | NTATION OF M                                | ULTIPLE DEF               | PENDENT                        | CLAIM               |  | <b> </b>   | . +145=           |                        | OR   | +290=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                           |                                |                     |  |            |                   |                        |      |                     |                        |